

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109990

Entity Name: ALTIAN LLC

FILED  
Apr 28, 2007  
Secretary of State

## Current Principal Place of Business:

10775 NW 50TH STREET  
SUITE 202  
DORAL, FL 33178

## New Principal Place of Business:

10845 NW 50TH STREET  
SUITE 303  
DORAL, FL 33178

## Current Mailing Address:

10775 NW 50TH STREET  
SUITE 202  
DORAL, FL 33178

## New Mailing Address:

10845 NW 50TH STREET  
SUITE 303  
DORAL, FL 33178

FEI Number: 20-4186599

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DELGADO, HORACIO G  
10775 NW 50TH STREET  
SUITE 202  
DORAL, FL 33178 US

## Name and Address of New Registered Agent:

DELGADO, HORACIO G  
10845 NW 50TH STREET  
SUITE 303  
DORAL, FL 33178 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HORACIO G DELGADO

04/28/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: DELGADO, HORACIO G  
Address: 10775 NW 50TH STREET, SUITE 202  
City-St-Zip: DORAL, FL 33178

Title: MGR (X) Delete  
Name: GARCIA, THAMAIRA  
Address: 18948 SW 33RD. COURT  
City-St-Zip: MIRAMAR, FL 33029

Title: MGR (X) Delete  
Name: TOVAR, LUIS E  
Address: 10775 NW 50TH STREET, SUITE 202  
City-St-Zip: DORAL, FL 33178

Title: MGR (X) Delete  
Name: JUAREZ, FEDERICO  
Address: 10775 NW 50TH STREET, SUITE 202  
City-St-Zip: DORAL, FL 33178

Title: MGR (X) Delete  
Name: MARIN, OSCAR  
Address: 10775 NW 50TH STREET, SUITE 202  
City-St-Zip: DORAL, FL 33178

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: DELGADO, HORACIO G  
Address: 10845 NW 50TH STREET, SUITE 303  
City-St-Zip: DORAL, FL 33178

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HORACIO G. DELGADO

MGRM

04/28/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date